## Form **8871** (July 2000)

## Political Organization Notice of Section 527 Status

OMB No. 1545-1693

**General Information** Employer identification number Name of organization APPLIED FOR Alfred "Al" Lawson Jr Mailing address (P.O. Box or number, street, and room or suite number) 400 North Adams Street Ste. A
City or town, state, and ZIP code
Tallahassee, FL 32301 E-mail address of organization 4b Custodian's address 4a Name of custodian of records 400 North Adams Street Alfred Lawson, Jr. Tallahassee, FL 32301 5b Contact person's address 5a Name of contact person Same Alfred Lawson, Jr. Business address of organization (if different from mailing address shown above). Number, street, and room or suite number <u>Same as Above</u> City or town, state, and ZIP code Same Purpose Describe the purpose of the organization Campaign for Florida Senate District 3 List of All Related Entities (see instructions) 8c Address 8a Name of related entity 8b Relationship NONE

AUG 0 9 2000

For Paperwork Reduction Act Notice, see page 4.

Cat. No. 30405V

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Name	9b Title	nly Compensated Employees (see instructions) 9c Address
NONE		
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Under penalties of perjury.	I declare that the organization	named in Part I is to be treated as an organization described in section 527 of the Inte ading accompanying schedules and statements, and to the best of my knowledge and b
Revenue Code, and that I it is true, correct, and com	nave examined this notice, incli plete	uning accompanying schedules and statements, and to the best of my knowledge and br
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gn Signature of author	10 0	

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